Updates from Opt-Out Counseling for Indiana University Pediatric Residents

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Introduction
- Physician burnout, characterized by a lack of fulfillment, depersonalization, and emotional exhaustion occurs in about 50% of pediatric residents across the nation according to the Pediatric Resident Burnout Survey distributed by the Resilience Study Consortium (1-2)
- Indiana University Pediatric Residency Program’s survey results were comparable to the level of burnout experienced nationally.
- An opt-out counseling initiative was developed in the fall of 2017 to provide anonymous mental health services for residents.

Objective
- To sustain and adapt a pilot opt-out counseling program for residents and measure changes in participation and follow-up.

Methods
- Second-year pediatric and combined pediatric residents were scheduled for an “opt-out” session with a Graduate Medical Education (GME) therapist in fall of 2019.
- Session characteristics:
  - Free
  - Optional
  - Considered protected time
  - 30-minutes long
  - Located on campus.
- Beginning with this cohort, residents were encouraged to let the therapist know at the start of the session if they preferred a general intake or wanted to discuss a specific issue.
- Appointment slots spanned two rotation blocks to accommodate schedules.
- Residents had the anonymous option to choose one of the following:
  1. Keep the scheduled appointment
  2. Change the date or time of the appointment
  3. Opt-out of the appointment
- The residency program received aggregate data at the end of the scheduled sessions.

Results
- Pilot data from fall of 2017 had 43 residents (25 categorical + 18 combined):
  - 28 residents (65%) attended the session; of those, 8 residents (29%) scheduled follow-up.
  - None of the residents that opted out were already established patients with a GME therapist.
- Follow-up data from fall of 2018 had 44 residents (25 categorical + 19 combined):
  - 24 residents (55%) attended the session; of those, 3 residents (13%) scheduled follow-up.
  - 3 residents (60%) that opted out were already established patients with a GME therapist.
- Follow-up data from fall of 2019 had 44 residents (25 categorical + 19 combined):
  - 18 residents (41%) attended the session; of those, 5 residents (28%) scheduled follow-up.
  - 5 residents (26%) that opted out were already established patients with a GME therapist.
- Collective data over the last three years found on average 23% of residents who participated in the program continued to seek mental health services through GME.

Aggregate Data by Year

<table>
<thead>
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<th></th>
<th>2017</th>
<th>2018</th>
<th>2019</th>
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<tbody>
<tr>
<td>Scheduled</td>
<td>43</td>
<td>44</td>
<td>44</td>
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<tr>
<td>Attended</td>
<td>28</td>
<td>24</td>
<td>18</td>
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<tr>
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<td>5</td>
<td>19</td>
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<tr>
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<td>5</td>
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<tr>
<td>No Show</td>
<td>8</td>
<td>14</td>
<td>7</td>
</tr>
<tr>
<td>Scheduled Follow-up</td>
<td>8</td>
<td>3</td>
<td>5</td>
</tr>
</tbody>
</table>

Conclusions
- Opt-out counseling can be associated with an increased number of residents establishing care with mental health services.
- By adapting the intake format to allow residents to discuss a particular issue, sessions may have been more productive and individualized.
- This program could be a model for other IU residency programs since they have access to the same GME mental health services.

Future Directions
- To enroll pediatric residents in the opt-out counseling program during their intern year to promote earlier awareness, destigmatization, and utilization of these mental health services.
  - The 2019-2020 pediatric intern cohort is currently being enrolled in the spring of 2020.
  - Plan to then enroll all pediatric interns in the 2020-2021 cohort in the fall of 2020.
- To help other residency programs begin opt-out counseling programs.
  - A limitation could be decreased GME therapist appointment availability with increasing volume of resident participants.

Acknowledgements
- Thank you to the GME therapists that have helped schedule the residents and continue to improve the opt-out program.

References

Contact Information
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*,I indicates co-first authorship.

Indiana University Pediatric Residency Program's survey results were comparable to those from the national Pediatric Resident Burnout Survey. An opt-out counseling initiative was developed in the fall of 2017 to provide anonymous mental health services for residents. This initiative helped schedule the residents and measure changes in participation and follow-up.

The 2017 cohort included 43 residents, 28 of whom (65%) attended the session; of those, 8 residents (29%) scheduled follow-up. None of the residents that opted out were already established patients with a GME therapist. The 2018 cohort included 44 residents, 24 of whom (55%) attended the session; of those, 3 residents (13%) scheduled follow-up, and 3 residents (60%) that opted out were already established patients with a GME therapist. The 2019 cohort also included 44 residents, 18 of whom (41%) attended the session; of those, 5 residents (28%) scheduled follow-up, and 5 residents (26%) that opted out were already established patients with a GME therapist.

Collective data over the last three years found on average 23% of residents who participated in the program continued to seek mental health services through GME. This program could be a model for other IU residency programs since they have access to the same GME mental health services. To enroll pediatric residents in the opt-out counseling program during their intern year to promote earlier awareness, destigmatization, and utilization of these mental health services. A limitation could be decreased GME therapist appointment availability with increasing volume of resident participants.

Future directions include enrolling pediatric residents in the opt-out counseling program during their intern year, helping other residency programs begin opt-out counseling programs. To help other residency programs begin opt-out counseling programs. A limitation could be decreased GME therapist appointment availability with increasing volume of resident participants.

Acknowledgements
- Thank you to the GME therapists that have helped schedule the residents and continue to improve the opt-out program.